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February 25, 2000

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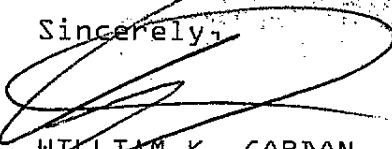
Secretary of State of Florida  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Hawthorne Insur. Agc. Inc., my file #00-065

Dear Clerk:

Enclosed please find the original Articles of Incorporation on the above referenced corporation along with my trust account check for your fees. Please process and return a filed copy to my office at your earliest convenience. If you have any questions or I can be of further assistance to you, please feel free to contact my office. Thank you.

Sincerely,

  
WILLIAM K. GORDON  
Attorney at Law  
rvh:enc.

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2000 FEB 29 PM 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, GINI L. MILLS, does hereby execute and acknowledge the following Articles of Incorporation:

1. The name of the corporation is HAWTHORNE INSURANCE AGENCY, INC.

2. The general purpose for which the corporation is the transaction of any and all lawful business for which corporations may be incorporated under Chapter 607.174, Florida Statutes.

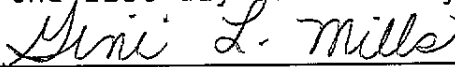
3. The aggregate number of shares which the corporation shall have authority to issue one hundred (100) shares of One Dollar (\$1.00) par value common stock.

4. The address of the corporation's initial registered office is 4 N. Highway 301, Post Office Box 429, Hawthorne, Alachua County, Florida 32640. The name and address of its initial registered agent is GINI L. MILLS at 4 N. Highway 301, Post Office Box 429, Hawthorne, Alachua County, Florida 32640. The registered office and principal office address are the same.

5. The names and addresses of the subscribers of these Articles of Incorporation, the number of shares of stock agreed to take and the value of the consideration thereof are as follows:

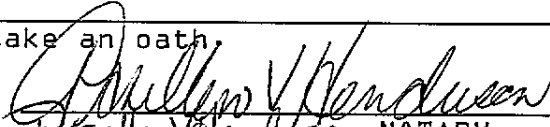
GINI L. MILLS	
P.O. Box 429	100 shares
Hawthorne, FL 32640	\$100.00 par value

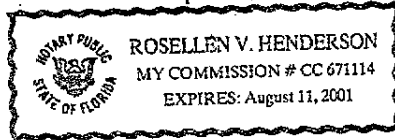
IN WITNESS WHEREOF, the incorporators have executed these Articles of Incorporation this the 21st day of February, 2000.

  
\_\_\_\_\_  
GINI L. MILLS

STATE OF FLORIDA  
COUNTY OF PUTNAM

The foregoing instrument was acknowledged before me this 21st day of February, 2000, by GINI L. MILLS, who is personally known to me (or has produced \_\_\_\_\_ as identification) and who did take an oath.

  
\_\_\_\_\_  
Rosellen V. Henderson, NOTARY  
Notary Public: State of Florida  
My Commission Expires:



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON  
WHOM PROCESS MAY BE SERVED**

IN COMPLIANCE WITH SECTION 48.091, Florida Statutes, the following is submitted:

First, that HAWTHORNE INSURANCE AGENCY, INC. desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 4 N. Highway 301, Post Office Box 429, Hawthorne, Alachua County, Florida 32640, appoints GINI L. MILLS, as its agent to accept service of process within Florida.

Signature: Gini L. Mills

Title: owner

Date: 2-21-00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Signature: Gini L. Mills

Date: 2-21-2000